

Our Lady of Victory Catholic School Registration Form

(This page to be separated and put in Health Records)

STUDENT'S LAST NAME	FIRST NAME	MIDDLE
---------------------	------------	--------

Emergency Information

Emergency Contact – Please list two other than parent/guardian:

NAME	ADDRESS	HOME PHONE	WORK PHONE
NAME	ADDRESS	HOME PHONE	WORK PHONE
PHYSICIAN'S NAME	PHYSICIAN'S ADDRESS	PHYSICIAN'S PHONE	

Medical Information

Is your child taking any medication? Yes No If yes: Please list medication below:

NAME MEDICATION

WHAT CONDITION IS BEING TREATED

Does your child have any medical condition we should be aware of? Yes No

IF YES, SPECIFY. IF MORE SPACE IS NEEDED, USE THE BACK OF THIS SHEET

IF MEDICATION IS NEEDED DURING THE SCHOOL DAY, CONTACT THE SCHOOL NURSE.

Immunizations Information — Enter month, day and year each immunization was given

Diphtheria & Tetanus*	MM/DD/YY	MM/DD/YY	MM/DD/YY	MM/DD/YY	MM/DD/YY
Diphtheria & Tetanus*	MM/DD/YY	MM/DD/YY	MM/DD/YY	MM/DD/YY	MM/DD/YY
Polio (OPV or IPV)	MM/DD/YY	MM/DD/YY	MM/DD/YY	MM/DD/YY	MM/DD/YY
Measles (Hard, Red)**	MM/DD/YY	MM/DD/YY	or Measles Serology:	MM/DD/YY	Titer
Rubella (German Measles)***	MM/DD/YY	MM/DD/YY	or Rubella Serology:	MM/DD/YY	Titer
Mumps ***	MM/DD/YY	MM/DD/YY	Or Mumps disease Diagnosed by a physician:		MM/DD/YY
Hepatitis B****	MM/DD/YY	MM/DD/YY	MM/DD/YY		
Varicella Vaccine:	MM/DD/YY	MM/DD/YY	Or Chicken Pox Disease Date:		MM/DD/YY
HIB	MM/DD/YY	MM/DD/YY	MM/DD/YY	Tuberculin Test:	MM/DD/YY
Other:	NAME	MM/DD/YY	MM/DD/YY	MM/DD/YY	DEVICE
					RESULT

* Diphtheria and Tetanus – effective 8/1/97, students entering school for the first time in kindergarten or first grade must have four properly spaced doses of tetanus and diphtheria vaccine, with one dose on or after their 4th birthday.

** Measles – two properly spaced doses, with the first given on or after one year of age.

*** Mumps, Rubella – one dose given on or after one year of age.

**** Hepatitis B – effective 8/1/97, three properly spaced doses are required for students entering school for the first time in kindergarten or first grade.